Docket No.: 00-8006

RZCEIVED CENTRAL FAX CENTER

## DÉMARK OFFICE IN THE UNITED STATES PATENT AND TRA

VERIZON IP

SEP 0 9 2004

In re Application of: Deepak V. Ayyagari et al.

Application No.: 09/727,926

Group Art Unit: 2665

Filed: November 30, 2000

Examiner: Phan, Man U

For: AN INTEGRATED METHOD TO DO

SCHEDULING ACCESS CONTROL AND ROUTING FOR AD HOC WIRELESS

**NETWORKS** 

MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION											
I hereby certify that this document is being transmitted via facsimile to the Palent and Trademark Office on the date shown below.											
Name	(Print / Type) Chidstign R. Andersen										
Signatur	Oota Santember 9, 2004										

## **AMENDMENT PURSUANT TO 37 CFR 1.111**

Dear Sir:

In response to the Office Action dated June 9, 2004 (hereinafter "the Office Action"), Applicants respectfully request reconsideration of the claims for allowance in light of the amendments and remarks provided below:

Amendments to the Claims begins on page 2. Remarks begin on page 10.

10/26/2004 PYARBORO 00000003 072347 09727926

01 FC:1201

258.00 DA

72.00 DA 02 FC:1202

## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000

Application or Docket Number 09131924

		CLAIMS AS	- Column)	-		SMALL ENTITY mn 2) TYPE			OTHER THAN			
TOTAL CLAIMS			(Column t)		COIG					OR 1	SMALL	
							_	RATE	FEE		RATE	FEE
FOR			NUMBER	FILED	NUMBER EXTRA			ASIC FEE	355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			32 minus 20= •			12		X\$ 9=		OR	X\$18=	216
INDEPENDENT CLAIMS			2 minus 3 =					X40=		OR	X80=	
MU	ILTIPLE DEPEN	IDENT CLAIM PI	IESENT				T	+135=		OR	+270=	
• If	the difference	in column 1 is	less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	926
7	and c	LAIMS AS A	MENDED - PART II					i		9	OTHER	
9	9904	(Column 1)	(Column 2) (Column 3)					SMALL I	ENTITY	OR	SMALL	
ΠA		CLAIMS REMAINING AFTER		HIGH NUM PREVIO	BER	PRESENT EXTRA	Ţ	RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
Æ		AMENDMENT		PAID			X\$ 9=		FEE		-	FEE
LA WEND WENT A	Total	. 30	Minus	<u>" 3</u>	2	= 4/		X\$ 9=		OR	X\$18=	1/2
1	Independent	NTATION OF MI	Minus	PENDENT	CLAIM	-3	L	X40=		OR	X8 <b>∕</b> 2	858
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=	
<u> </u>							AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	33/
<b>Š</b> _		(Column 1)		(Colur	mn 2)	(Column 3)				•		Ŭ
AMENDMENT-BIT JOIG		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ADM.	Total	•	Minus	••		=		X\$ 9=		OR	X\$18=	
ME	Independent	•	Minus	***		=		X40=		OR	X80=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								-			
			•			•	Ŀ	+135=		OR	+270=	
				AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE				
		(Column 1)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	,	HIGH NUM PREVIC PAID	BER DUSLY	PRESENT EXTRA	ı	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total		Minus	**		<b>-</b>	:	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	•••		=		X40=			X80=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	7.5	
• 1	the entry in colu	mn 1 is less than th	e entry in colu	Ľ	135=		OR	+270=				
**	f the "Highest Nu	mber Previously Pa mber Previously Pa	ild For IN THI	S SPACE I	s less thai	n 20, enter "20."	AD	TOTAL DIT. FEE		OR	TOTAL   ADDIT. FEE	
		mber Previously Pai					r found	in the app	cod etainqon	in col	umn 1.	